



Wolf: Opioid crisis a state disaster

‘We are still losing too many Pennsylvanians’

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Gov. Tom Wolf declared Pennsylvania’s opioid crisis a statewide disaster emergency

Wednesday afternoon, paving the way for policy changes that are expected to knock down barriers for people needing treatment, cut red tape for providers and allow first responders to leave behind naloxone kits at non-fatal overdose scenes.

“We are still losing too many Pennsylvanians,” said Wolf, adding that early reports indicate 5,260 Pennsylvanians died last year from drug

overdoses, up from 4,642 in 2016. “We are fourth in terms of having the highest rate of increase in deaths in the country. It’s a bad record.”

The disaster declaration, used in the state’s history for the first time to respond to a public health crisis, will not pump more money into treatment or enforcement, but pledges to waive 13 policies or regulations that stand in the way of people getting help.

Pennsylvania is the eighth state in the country to declare the opioid crisis a disaster emergency. By law, the declaration only lasts for 90 days, but efforts are underway to extend the changes, Wolf said.

“We need to look at ways we can reduce burdens on treatment providers, cut back on paperwork and devote those hours to patients who so desperately need treatment,” said Jennifer Smith, secretary of

the Pennsylvania Department of Drug and Alcohol Programs.

For example, as of now, some people seeking residential treatment are required to have a face-to-face evaluation by a doctor. Wednesday’s declaration would allow certified registered nurse practitioners and physician assistants to start the admissions process.

Smith said physicians

See WOLF, A2



SPORTS | C1

EAGLES REMAIN CONFIDENT IN FOLES

The only true believers in the potential for victory may be inside the team’s locker room



COMMUNITY | B1

TEXTING WHILE DRIVING

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NEWS | A4

REDISTRICTING

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Carpinteria resident Jeff Gallup carries his bike through mud Tuesday on Foothill Road in Carpinteria, Calif. Homes were swept from their foundations as heavy rain sent mud and boulders sliding down hills stripped of vegetation by Southern California’s recent wildfires. [MICHAEL OWEN BAKER/THE ASSOCIATED PRESS]

Mudslide death toll climbs

By Christopher Weber and Daniel Dreifuss
The Associated Press

MONTECITO, Calif. — At least 13 people were killed and homes were torn from their foundations Tuesday as downpours sent mud and boulders roaring down hills stripped of vegetation by a gigantic wildfire that raged in Southern California last month.

Rescue crews used helicopters to pluck people from rooftops because trees and power lines blocked roads, and firefighters pulled a mud-caked 14-year-old girl from a collapsed Montecito home where she had been trapped for hours.

“I thought I was dead for a minute there,” the girl could be heard saying on video posted by KNBC-TV before she was taken away on a

stretcher.

Most deaths were believed to have occurred in Montecito, a wealthy enclave of about 9,000 people northwest of Los Angeles that is home to such celebrities as Oprah Winfrey, Rob Lowe and Ellen DeGeneres, said Santa Barbara County spokesman David Villalobos. At least 25 people were injured and others were unaccounted for.

The mud was unleashed

in the dead of night by flash flooding in the steep, fire-scarred Santa Ynez Mountains. Burned-over zones are especially susceptible to destructive mudslides because scorched earth doesn’t absorb water well and the land is easily eroded when there are no shrubs.

The torrent of mud early Tuesday swept away cars

See MUDSLIDES, A2

Trump signs Fitzpatrick fentanyl screening bill

By James Boyle
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U.S. customs agents soon will have more resources to enhance fentanyl and synthetic opioid screening efforts at the border, after President Trump on Wednesday signed legislation co-authored by Rep. Brian Fitzpatrick, R-8, of Middletown.

“In 2016, more than 42,000 Americans died from an opioid overdose, with nearly half being directly attributed to fentanyl and other synthetic opioids,” said Fitzpatrick, co-author of the International Narcotics Trafficking Emergency

Response by Detecting Incoming Contraband with Technology (INTERDICT) Act, in a statement. “Halting the proliferation of these illicit drugs from Mexico and China is a crucial step in addressing our nation’s opioid epidemic.”

Under the new law, U.S. Customs and Border Patrol will receive \$15 million to increase the department’s equipment and personnel. The planned improvements include additional portable chemical screening devices available at ports of entry and mail and express consignment facilities, plus additional fixed chemical screening devices

See DRUGS, A3



Fitzpatrick

“In 2016, more than 42,000 Americans died from an opioid overdose...”

Rep. Brian Fitzpatrick, R-8, of Middletown



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NEWS

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Pick 3
7-9-4, Fireball: 0
Pick 4
2-2-1-2, Fireball: 0
Cash 5
5-7-18-23-27, Xtra: 2
Midday Pick 3
6-8-9, Fireball: 4
Midday Pick 4
7-9-9-3, Fireball: 4

Pennsylvania
Cash 5
8-11-19-26-40
Match 6 Lotto
1-8-18-35-42-46
Pick 2 Day
5-4, Wild: 4
Pick 2 Evening
1-7, Wild: 9
Pick 3 Day
2-6-1, Wild: 4
Pick 3 Evening
1-8-3, Wild: 9
Pick 4 Day
4-2-5-7, Wild: 4
Pick 4 Evening
9-3-4-2, Wild: 9
Pick 5 Day
2-4-7-9-0, Wild: 4
Pick 5 Evening
9-6-9-4-6, Wild: 9
Treasure Hunt
3-4-7-16-25

MULTISTATE
Powerball (1-10-18)
7-24-33-49-50
Powerball: 4
Mega Millions (1-9-18)
16-29-31-65-67 Mega Ball 23
Cash4Life (1-8-18)
3-11-44-47-58, Cash Ball: 3

ONLINE POLL

Wednesday's results: Oprah Winfrey for president. Good idea or bad idea?



Today's question: What's your favorite Winter Olympic sport?
1.) Ice Hockey
2.) Figure Skating
3.) Downhill Skiing
4.) Curling
5.) Speed skating
6.) Other

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MUDSLIDES

Continued from A1

and destroyed several homes, reducing them to piles of lumber. Photos posted on social media showed waist-deep mud in living rooms.

“I came around the house and heard a deep rumbling, an ominous sound I knew was ... boulders moving as the mud was rising,” said Thomas Tighe, who discovered two of his cars missing from the driveway in the middle of the night. “I saw two other vehicles moving slowly sideways down the middle of the street in a river of mud.”

In daylight, Tighe was shocked to see a body pinned by muck against his neighbor’s home. He wasn’t sure who it was.

WOLF

From Page A1

responding to the epidemic are in short supply and aren’t always available when a patient needs help.

“This could delay intake into a facility by hours or days; it’s not acceptable,” Smith said.

It would also allow for emergency rooms doctors to prescribe drugs that are used to treat addiction and its withdrawal effects.

Currently, licensing requirements limit the number of doctors who can prescribe Suboxone, which contains buprenorphine, an opioid that is used to treat dependence on other types of the drugs, and naloxone, which is used to reverse the effects of them. But the declaration will waive some of the requirements, allowing doctors to administer short-term medication-assisted treatment consistent with federal regulations, but without needing to notify the state.

Patients who are revived with naloxone after an overdose may not always get immediate access to detox and treatment, so prescribing Suboxone and short-term medication-assisted treatment may help reduce the pain and other symptoms they experience, and prevent them from using again, explained Dr. Christine Roussel, clinical pharmacy manager at Doylestown Hospital and legislative chair for the Pennsylvania Society of Health System Pharmacists.

“It’s incredibly painful for them, so when they leave here ... they are in pain and they’re going through acute withdrawal,” she said.

There are concerns that patients may seek out Suboxone and misuse the medication, or divert it after leaving, but Dr. Darin Geracimos, medical director of emergency services at St. Mary Medical Center in Middletown, noted that prescriptions will be tracked through the state’s Prescription Drug Monitoring Program.

“There are pros and cons to it and you can argue either way, but those concerns are valid,” he said.

Overall, the declaration will enable doctors to do more to help patients who normally would have limited recovery options, according to Dr. Theodore Christopher, president of the Pennsylvania Medical Society.

In a statement Wednesday, Christopher pledged the society will continue monitoring the crisis and advocating for patients and physicians, and for the expansion of access to treatment of substance use disorder.

“As we work to educate Pennsylvania physicians on this declaration and what it means, we’ll also continue to help them navigate new ways of helping their patients,” said Christopher, also a professor and chairman



A bag of heroin confiscated by the Bensalem Police Department. [KIM WEIMER / STAFF PHOTOJOURNALIST]

of the Department of Emergency Medicine at the Sidney Kimmel Medical College of Thomas Jefferson University.

Limited resources to date have helped some, but not enough, he added. “Progress has been made, but it’s clear that the finish line is not in sight.”

The declaration also will allow EMS medics to leave behind naloxone, which reverses the effect of opioids, after they revive someone from an overdose and that person refuses to go into treatment or go to a hospital. That is at least one proposed policy change that is not embraced entirely.

“It’s met with mixed feelings,” said Evan Resnikoff, president of the Bucks County EMS Chiefs Association. “It’s a hot-charged subject and opinions vary from believing it could help to believing it could enable a bigger problem.”

He hopes that people understand that people using naloxone, which is publicly accessible to all Pennsylvanians and also known by the brand name Narcan, still seek medical assistance after using it. Though family members and friends can use it to revive someone, the patient may still suffer from the effects of the drugs, he said. “Medical attention is needed. It’s not like taking a Tylenol for a headache,” Resnikoff said.

He said Bucks County EMS providers are waiting on additional guidance from the state before moving forward with the policy change.

The declaration also expands access to the Prescription Drug Monitoring Program for clinical purposes, makes overdose and neonatal abstinence syndrome a reportable condition to improve data collection and makes contract changes to ensure that the 1-800-662-HELP line continues uninterrupted.

Smith, acting secretary of drugs and alcohol programs, said that since November 2016 nearly 20,000 calls have gone to the help line, which connects callers to resources and treatment.

The Department of Health’s acting secretary Dr. Rachel Levine called on the public to note that addiction is a disease, “a medical condition.”

“They are not a moral failing. It’s a public health crisis. It’s the worst public health crisis we’ve faced in Pennsylvania and, you could argue, in the nation in more than a generation.”

Levine said the declaration will prompt the creation of a crisis

command center that will collect and share data and information from local, county and state agencies. Wolf said the command center will be overseen by the Pennsylvania Emergency Management Agency (PEMA) and will work to monitor all initiatives with the state Department of Health, state Department of Drug and Alcohol Programs, the Pennsylvania Commission on Crime and Delinquency, and the state police.

Diane Rosati, executive director of the Bucks County’s Drug and Alcohol Commission, welcomed the state’s initiative to make changes to improve access to treatment.

“It enables policy changes that would not have otherwise occurred, and we are ready to do our part to move it forward,” she said.

Lisa Clayton, clinical director of Family Service Association of Bucks County, agreed. In 2016, the organization was named one of the state’s Centers of Excellence, designated to improve access to opioid addiction treatment.

“What (Wolf) is doing is really recognizing the significance and the seriousness of this opioid epidemic,” she said.

Hospital data will be collected, too. The Department of Health will make overdoses and neonatal abstinence syndrome – when babies are born in withdrawal

Need help?

The Bucks County Drug and Alcohol Commission provides free doses of naloxone, while supplies last, from 10 a.m. to 1 p.m. Mondays and Thursdays at its office, 600 Louis Drive, Suite 102A, Warminster.

Take the online training at getnaloxonenow.org and show your certificate at the office, or meet with the office staff to learn how to use the overdose antidote.

For more information, contact Mallory Perrotti at 215-444-2785 or mperrotti@buckscounty.org, or Lambert Tolbert at 215-444-2704 or lrtolbert@buckscounty.org. Learn more about resources and services in Bucks on the commission's website at <http://bit.ly/BCDaAC>.

The Montgomery County Office of Drug and Alcohol will host two naloxone distribution and education events in the new year:

6:30 p.m. March 13, in the multipurpose room at the Upper Perkiomen YMCA, 1399 Quakertown Road, Upper Hanover.

6:30 p.m. June 5, in the South Hall Building Community Room at Montgomery County Community College West Campus, 101 College Drive, Pottstown.

The events are free but pre-registration is required; visit www.montcopa.org/naloxoneregistration or email Katie Kucz at kkucz@montcopa.org.

For information about where to get naloxone at pharmacies using a standing order or where to dispose of unused medication and drop-box locations, visit www.montcopa.org/overdoseprevention.

The Council of Southeast Pennsylvania offers training, resources and support. For more information call 215-345-6644 or the national helpline, 1-800-221-6333.

To get connected with treatment, call the state’s 24/7 helpline, 1-800-662-HELP (4357).

– conditions mandated to be reported to the state when people survive them. Right now, only deaths are consistently reported.

Cathleen Palm, founder and executive director of the Center for Children’s Justice, called adding neonatal abstinence syndrome to the state’s list of reportable health conditions “promising,” but that the key to making it work will be how the data is reported and used.

The declaration also will waive the fees for birth certificates for people who are affected by opioid use disorder and need copies in order to access treatment, but who sometimes cannot afford them.

Wolf said the declaration was not a “magic bullet,” but rather a continuation of his efforts to do more to curb the epidemic.

“We all know we have more to do,” Wolf said. “This is not the end of the story in terms of addressing the epidemic. This is an attempt on our part to do more.”

Staff writers Jo Ciavaglia and J.D. Prose contributed to this report.

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